



Harvard Faculty Member

Name:

FAMILY

FIRST

MIDDLE

Name in native language:

Title:

Contact Information

STREET

CITY

STATE

ZIP CODE

COUNTRY

TELEPHONE

FAX

E-MAIL

TUSA Faculty Member*

Name:

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***If you will be collaborating with additional TUSA colleagues, please include their information on a separate document.**

Proposal **(Please explain how this project will contribute to longer term collaboration between scholars at Harvard and from Taiwan)**

Budget

Please submit completed application by email to ndrake@fas.harvard.edu.

All reimbursement materials should be submitted to National Taiwan University.

Applicant Signature

SIGNATURE

DATE